| ANTEND ARRESONTION FEE DETERMINATION DECORDS   |  |                |                          |              |                  |       |                   | Application or Docket Number |                        |                               |                     |                        |  |
|--|--|----------------|--------------------------|--------------|------------------|-------|-------------------|------------------------------|------------------------|-------------------------------|---------------------|------------------------|--|
| PATENT APPLICATION FEE DETERMINATION RECOR<br>Effective October 1, 2000  |  |                |                          |              |                  |       |                   | 09832828                     |                        |                               |                     |                        |  |
| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |                |                          |              |                  |       | SMALL ENTITY TYPE |                              |                        | OTHER THAN<br>OR SMALL ENTITY |                     |                        |  |
| TOTAL CLAIMS   |  | 2              |                          |              |                  |       | RATI              | Ī                            | FEE                    | 1                             | RATE                | FEE                    |  |
| FOR  |  | NUMBER FILED   |                          | NUMBER EXTRA |                  |       | BASIC             | TEE                          | 355.00                 | l <sub>ob</sub>               | BASIC FEE           | 710.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  | 57_minus 20=   |                          | .32          |                  |       | X\$ 9             |                              |                        | OR                            | X\$18=              | 666.                   |  |
| INDEPENDENT CLAIMS   |  | 7_ minus 9 =   |                          | · 4          |                  |       | X40:              | <b>,</b>                     |                        | OR                            | X80=                | 320.                   |  |
| MULTIPLE DEPEN   | RESENT                                 |                |                          |              |                  | +135= |                   |                              | OR                     | +270=                         | 300.9               |                        |  |
| If the difference i  | less than zero, enter "0" in column 2  |                |                          |              |                  | TOTA  | _                 |                              | OR                     | TOTAL                         | 1696.6              |                        |  |
| CLAIMS AS AMENDED - PART (I<br>(Column 1) 6-1-04 (Column 2) (Column 3)   |  |                |                          |              |                  |       | 0110              |                              |                        | -                             | OTHER               |                        |  |
|  | (Column 1)                             | 6-1-04         | (Colu                    |              | (Column 3)       |       | SMA               |                              | NTITY                  | OR<br>1                       | SHALL               |                        |  |
| Total  | REMAINING<br>AFTER<br>AMENDMENT        |                | NUM<br>PREVI             | BER<br>DUSLY | PRESENT<br>EXTRA |       | RATI              | ۱                            | ADDI-<br>TIONAL<br>FEE |                               | RATE                | ADDI-<br>TIONAL<br>FEE |  |
| Total  | 50                                     | Minus          | - 5                      | 7            | •                |       | X\$ 9             | -                            |                        | ОЯ                            | X\$18=              |                        |  |
| Independent  | .7                                     | Minus          | ***                      | 2_           | -                | П     | X40=              | . ]                          |                        | OR                            | X80=                |                        |  |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |  |                |                          |              |                  |       | :A135             |                              |                        | OR                            | +270= .             |                        |  |
|  |  | BEST A         | VAILA                    | BLE          | COPY             |       | 101               | Į.                           |                        |                               | TOYL                |                        |  |
| 1-505  | (Column 1)                             |                | (Cohn                    | 1000         | (Column 3)       | •     | NDOIT. FI         | EE L                         |                        | ,                             | ADDIT, FEE          |                        |  |
|  | CLAIMS                                 |                | HIGH                     | EST          |                  | ſ     |                   | T                            | ADDI-                  | li                            |                     | ADDF.                  |  |
| Total  | REMAINING AFTER .AMENDMENT             |                | PREVIO<br>PAID           | JUSLY        | PRESENT          |       | RATE              |                              | RONAL<br>FEE           |                               | RATE                | TIONAL                 |  |
| Total  | 37)                                    | Minus          | ••                       | 50           | -                |       | X\$ 9             | . [                          |                        | OA                            | X\$18=              |                        |  |
| Independent  | 7                                      | Minus          | •••                      | 7            | P./              |       | X40=              |                              |                        | OA                            | . X80=              |                        |  |
| FIRST PRESENTATION OF WALTIPLE DEPENDENT CLAIM   |  |                |                          |              |                  |       | +135=             | . [                          |                        | OR                            | +270=               |                        |  |
|  | /.                                     |                |                          |              |                  |       | YOU<br>THOO       |                              |                        | OR                            | TOTAL<br>ADDIT, FEE |                        |  |
| 8-805  | (Cotumn 1)                             | <u>.</u>       | (Cotur                   | nn 2)        | (Column 3)       |       | WUII. PI          |                              |                        |                               |                     |                        |  |
|  | CLAMB                                  |                | HEGH                     |              | PRESENT          | ſ     |                   | T                            | ADDI-                  |                               |                     | ADDI-                  |  |
|  | AFTER<br>AMENOMENT                     |                | PREVIO                   | XUSLY        | EXTRA            |       | RATE              | ין                           | TONAL<br>FEE           |                               | RATE                | TIONAL<br>FEE          |  |
| Total -  | < 0                                    | Mirus          | •                        | <(1)         | <b>"</b>         |       | X\$ 9-            | 1                            |                        | ÓR                            | X\$18=              |                        |  |
| Total Independent  | 1                                      | Minus          | •••                      | 1            |                  |       | X40=              | 1                            |                        | OR                            | X80=                |                        |  |
| FIRST PRESEN   | TATION OF MI                           | ATIPLE DE      | ENDENT                   | CAM          | الليا            | İ     | +135=             | Ī                            |                        | OR                            | +270=               |                        |  |
| " If the entry in column 1 is tess than the entry in column 2, write "O" in column 3. " If the "Highest Humber Previously Paid For" BY THES SPACE is tess than 20, enter "20, ""If the "Highest Number Previously Paid For" IN THES SPACE is less than 3, enter "3." |  |                |                          |              |                  |       | 101/<br>DOIT. FE  | ŧ                            |                        | ΛĐ                            | TOTAL<br>ADDIT. FEE |                        |  |
| ""I the Tighest Numb. The Tighest Mumb   | per Previously Pa<br>er Previously Pai | d For (Total o | a service t<br>Independi | ard) to the  | highest numbe    | r lou | nd in the         | <b>atab</b> u                | and eterogo            | in ca                         | uran 1.             |                        |  |
| M GTO-478  |  |                |                          |              |                  |       |                   | _                            | 4.000 44               |                               |                     | COMMERCE               |  |

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